

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM

ACUTE-CARE PERFORMANCE INDICATORS

RESULTS AND ANALYSIS



For the Measurement Period Ending September 30, 2002

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OVERVIEW

This report includes information on performance indicators for preventive health care services provided to selected members enrolled with acute-care health plans that contract with the Arizona Health Care Cost Containment System (AHCCCS). These members are eligible for AHCCCS under Medicaid or the State Children's Health Insurance Program (SCHIP), known as KidsCare.

The report includes data from nine health plans (Contractors), as well as the Comprehensive Medical and Dental Program (CMDP), a health plan operated by the Arizona Department of Economic Security (DES) for children and adolescents in foster care. Because of the uniqueness of CMDP, its results are reported separately in an appendix.

The results reported here should be viewed as *indicators* of utilization of services, rather than absolute rates for how successfully AHCCCS and/or its Contractors provide care. Many factors affect whether AHCCCS members use services. By analyzing trends over time, AHCCCS and its Contractors can identify areas for improvement and implement interventions to increase access to, and receipt of, services.

Methodology

AHCCCS used the Health Plan Employer Data and Information Set (HEDIS®) as a guide in determining the methodology for these indicators. Developed and maintained by the National Committee for Quality Assurance (NCQA), HEDIS is the most widely used set of performance

measures in the managed care industry.

One of the criteria for selecting members to be included in the analyses is that they be continuously enrolled for a minimum period of time with one Contractor. Thus, members included in the results of each indicator represent only a sample of AHCCCS members, rather than the entire acute-care population.

This report includes data for the period from October 1, 2001, through September 30, 2002 (and may include the previous year, depending on the indicator). Results are reported in aggregate by Maricopa, Pima and combined rural counties, and by individual Contractor. The report also indicates whether an increase or decrease in a rate is statistically significant; that is, whether the change is probably true and not merely due to chance. If available, national averages for Medicaid managed care plans reported by NCQA are compared with AHCCCS overall rates.

Rotation of Measures

In 2000, NCQA began to "rotate" measures. AHCCCS has adopted this rotation schedule in order to be able to produce a more comprehensive annual report of preventive health care services. This rotation schedule alternates measures on a biennial basis, which allows Contractors an "intervention year" between most measures; thus, providing adequate time to focus activities on improving specific rates, as identified in the report.

Two measures – Adults’ Access to Preventive and Ambulatory Health Services and Children’s Access to Primary Care Practitioners (PCPs) – are reported on an annual basis. Beginning with this report, AHCCCS will group and report measures on a rotating basis.

Highlights of the Data

All indicators of health services provided to children and adolescents eligible under Medicaid showed statistically significant improvement in the current measurement period. The only indicator that did not improve was Adults’ Access to Preventive and Ambulatory Health Services, which experienced a relative decline of 1.3 percent from the previous year, to 77 percent.* The decrease is statistically significant.

During the current measurement period, the rate of Children’s Access to PCPs among KidsCare members improved to nearly 79 percent, for a relative increase of 14.6 percent. The increase is statistically significant and represents the greatest overall improvement among all the indicators reported here. AHCCCS has measured and reported separate rates for KidsCare members for this indicator since 2000.

Beginning with this measurement period, AHCCCS is reporting results separately for KidsCare members for several other performance indicators. In the current measurement period, overall rates for KidsCare members were higher than the respective rates for Medicaid-eligible members.

Performance Improvement

Under their contracts with AHCCCS, health plans are required to improve

their rates for performance indicators and achieve specific goals for each indicator. AHCCCS will provide individual results to Contractors and require corrective action plans as necessary, based on the findings in this report. Contractors that fail to show improvement may be subject to sanctions. AHCCCS will continue to provide technical assistance, such as identifying new interventions or enhancements to existing efforts, to help Contractors improve their performance. This data also may be used in developing Performance Improvement Projects, which are required of all Contractors.

It should be noted that, as of October 1, 2003, two of the health plans included in this report – Family Health Plan of Northeastern Arizona and CIGNA Community Choice – no longer have contracts with AHCCCS.

Feedback

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Methodology and Technical

Specifications for these indicators are available at:

www.ahcccs.state.az.us/studies

* In some cases, AHCCCS overall rates are rounded to the nearest whole number for comparison with AHCCCS Minimum Performance Standards and Goals.

Children's Access to Primary Care Practitioners

Children's access to primary care services is critical in helping to prevent the premature onset of disease and disability. Lack of access to primary care practitioners (PCPs) often results in unnecessary hospitalizations.

PCPs can address physical, nutritional, developmental and behavioral health needs, and make referrals to specialists or services such as nutritional support and parenting classes. If members are receiving these general health care services through a PCP, they likely have access to other levels of the health care system.

Indicator Description

This indicator measured the percentage of children and adolescents who:

- were 1 through 20 years of age if eligible under Medicaid, or 1 through 18 years of age if eligible under KidsCare, as of September 30, 2002,
- were continuously enrolled with one acute-care Contractor during the measurement period (one break in enrollment, not exceeding 31 days, was allowed) and
- had at least one visit with a PCP (pediatrician, general or family practice physician, internal medicine physician, physician's assistant, nurse practitioner or obstetrician/gynecologist) during the measurement period.

Indicator Goals

AHCCCS has adopted a Minimum Performance Standard that Contractors achieve a rate of 77 percent for this indicator. If Contractors have already achieved this rate, they should strive for the AHCCCS Goal of 80 percent.

Trends and National Benchmarks

The National Committee for Quality Assurance (NCQA) has reported national averages for Medicaid health plans for this indicator. In calendar year 2001, the averages by age group were:

1 year	88.4 percent
2 through 6 years	78.4 percent
7 through 11 years	79.1 percent

NCQA did not report an average for children 12 through 20 years old.

The AHCCCS overall rate for children age 1 was 96 percent for the Medicaid group and 98 percent for the KidsCare group. For ages 2 through 6, AHCCCS overall rates were 83 percent and 78 percent, respectively.

Rates for both the Medicaid and KidsCare groups reached their highest points in the current measurement period. The rate for Medicaid-eligible children was 77 percent, a 3.7-percent relative increase over the previous year. The KidsCare rate was 79 percent, a 14.6-percent relative increase. Both increases in rates are statistically significant ($p < .001$).

Overall rates were slightly higher among members residing in Pima County, compared with Maricopa and the combined rural counties.

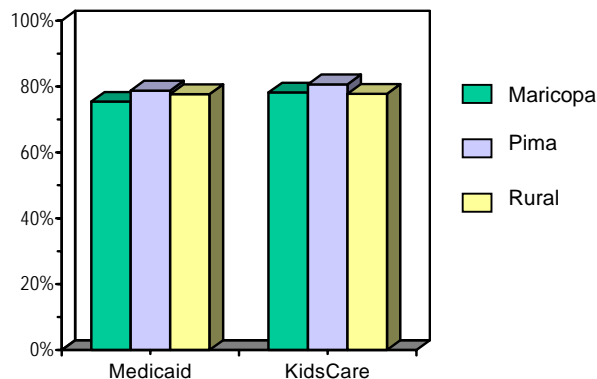


Table 1
Arizona Health Care Cost Containment System
CHILDREN'S ACCESS TO PRIMARY CARE PRACTITIONERS, BY CONTRACTOR
MEMBERS ELIGIBLE UNDER MEDICAID
Measurement Period: October 1, 2001, through September 30, 2002

Contractor	Ages	Number of Members	Number with ≥ 1 Visits	Percent with ≥ 1 Visits	Relative Percent Change from Previous Period	Statistically Significant Change From Previous Period?
AZ Physicians IPA *	1	6,230	6,008	96.4%		
	2	4,580	4,202	91.7%		
	3-6	16,391	13,424	81.9%		
	7-11	17,678	12,264	69.4%		
	12-20	18,633	13,004	69.8%		
	Total	63,512	48,902	77.0%	1.6%	Yes (p<.001)
AZ Physicians IPA	1	4,682	4,501	96.1%		
	2	3,572	3,178	89.0%		
	3-6	12,807	10,288	80.3%		
	7-11	14,129	9,570	67.7%		
	12-20	13,546	9,406	69.4%		
	Total	48,736	36,943	75.8%		
CIGNA Community Choice*	1	1,539	1,497	97.3%		
	2	1,095	1,020	93.2%		
	3-6	3,737	3,103	83.0%		
	7-11	3,732	2,631	70.5%		
	12-20	4,242	2,998	70.7%		
	Total	14,345	11,249	78.4%	-0.2%	No (p=.816)
CIGNA Community Choice	1	1,077	1,052	97.7%		
	2	842	771	91.6%		
	3-6	2,689	2,222	82.6%		
	7-11	2,887	2,030	70.3%		
	12-20	2,948	2,127	72.2%		
	Total	10,443	8,202	78.5%		
Family Health Plan NEAZ	1	196	180	91.8%		
	2	182	161	88.5%		
	3-6	673	524	77.9%		
	7-11	786	556	70.7%		
	12-20	989	684	69.2%		
	Total	2,826	2,105	74.5%	-2.3%	No (p=.291)
Family Health Plan NEAZ	1	63	62	98.4%		
	2	45	41	91.1%		
	3-6	230	192	83.5%		
	7-11	251	177	70.5%		
	12-20	287	196	68.3%		
	Total	876	668	76.3%		

* Denotes Contractor met or exceeded the AHCCCS Minimum Performance Standard.
Shaded rows are totals and percentages for the previous measurement period.

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MEMBERS ELIGIBLE UNDER MEDICAID
Measurement Period: October 1, 2001, through September 30, 2002

Contractor	Ages	Number of Members	Number with ≥ 1 Visits	Percent with ≥ 1 Visits	Relative Percent Change from Previous Period	Statistically Significant Change From Previous Period?
Health Choice AZ	1	2,159	2,066	95.7%		
	2	1,527	1,403	91.9%		
	3-6	4,468	3,519	78.8%		
	7-11	4,098	2,653	64.7%		
	12-20	3,856	2,512	65.1%		
	Total	16,108	12,153	75.4%	5.1%	Yes (p<.001)
Health Choice AZ	1	1,747	1,681	96.2%		
	2	1,137	1,005	88.4%		
	3-6	3,588	2,716	75.7%		
	7-11	3,356	1,950	58.1%		
	12-20	2,919	1,801	61.7%		
	Total	12,747	9,153	71.8%		
Maricopa Health Plan	1	1,387	1,324	95.5%		
	2	915	800	87.4%		
	3-6	3,014	2,167	71.9%		
	7-11	3,092	1,653	53.5%		
	12-20	2,880	1,513	52.5%		
	Total	11,288	7,457	66.1%	11.2%	Yes (p<.001)
Maricopa Health Plan	1	1,025	944	92.1%		
	2	769	652	84.8%		
	3-6	2,377	1,489	62.6%		
	7-11	2,628	1,229	46.8%		
	12-20	2,200	1,031	46.9%		
	Total	8,999	5,345	59.4%		
Mercy Care Plan *	1	5,986	5,766	96.3%		
	2	3,786	3,475	91.8%		
	3-6	12,350	10,103	81.8%		
	7-11	11,984	8,277	69.1%		
	12-20	12,965	9,196	70.9%		
	Total	47,071	36,817	78.2%	5.8%	Yes (p<.001)
Mercy Care Plan	1	3,989	3,763	94.3%		
	2	2,742	2,384	86.9%		
	3-6	9,250	7,019	75.9%		
	7-11	9,321	6,030	64.7%		
	12-20	9,062	6,205	68.5%		
	Total	34,364	25,401	73.9%		
Phoenix Health Plan/CC	1	2,243	2,154	96.0%		
	2	1,538	1,408	91.5%		
	3-6	5,373	4,341	80.8%		
	7-11	5,005	3,316	66.3%		
	12-21	5,176	3,450	66.7%		
	Total	19,335	14,669	75.9%	5.2%	Yes (p<.001)
Phoenix Health Plan/CC	1	1,453	1,403	96.6%		
	2	1,223	1,096	89.6%		
	3-6	4,008	3,022	75.4%		
	7-11	4,013	2,467	61.5%		
	12-20	3,816	2,476	64.9%		
	Total	14,513	10,464	72.1%		

Shaded rows are totals and percentages for the previous measurement period.

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MEMBERS ELIGIBLE UNDER MEDICAID
Measurement Period: October 1, 2001, through September 30, 2002

Contractor	Ages	Number of Members	Number with ≥ 1 Visits	Percent with ≥ 1 Visits	Relative Percent Change from Previous Period	Statistically Significant Change From Previous Period?
Pima Health System *	1	365	355	97.3%		
	2	240	231	96.3%		
	3-6	675	544	80.6%		
	7-11	917	686	74.8%		
	12-20	1,072	764	71.3%		
	Total	3,269	2,580	78.9%	0.9%	No (p=.508)
Pima Health System	1	273	270	98.9%		
	2	155	144	92.9%		
	3-6	589	499	84.7%		
	7-11	835	577	69.1%		
	12-20	852	625	73.4%		
	Total	2,704	2,115	78.2%		
University Family Care *	1	473	458	96.8%		
	2	378	361	95.5%		
	3-6	1,267	1,095	86.4%		
	7-11	1,530	1,131	73.9%		
	12-20	1,710	1,284	75.1%		
	Total	5,358	4,329	80.8%	2.9%	Yes (p=.006)
Universtiy Family Care	1	358	352	98.3%		
	2	307	288	93.8%		
	3-6	998	824	82.6%		
	7-11	1,289	912	70.8%		
	12-20	1,290	956	74.1%		
	Total	4,242	3,332	78.5%		
TOTAL	1	20,578	19,808	96.3%		
	2	14,241	13,061	91.7%		
	3-6	47,948	38,820	81.0%		
	7-11	48,822	33,167	67.9%		
	12-20	51,523	35,405	68.7%		
	Total	183,112	140,261	76.6%	3.7%	Yes (p<.001)
TOTAL	1	14,667	14,028	95.6%		
	2	10,792	9,559	88.6%		
	3-6	36,536	28,271	77.4%		
	7-11	38,709	24,942	64.4%		
	12-20	36,920	24,823	67.2%		
	Total	137,624	101,623	73.8%		

Shaded rows are totals and percentages for the previous measurement period.

Table 2
Arizona Health Care Cost Containment System
CHILDREN'S ACCESS TO PRIMARY CARE PRACTITIONERS, BY CONTRACTOR
MEMBERS ELIGIBLE UNDER KIDSCARE
Measurement Period: October 1, 2001, through September 30, 2002

Contractor	Ages	Number of Members	Number with ≥ 1 Visits	Percent with ≥ 1 Visits	Relative Percent Change from Previous Period	Statistically Significant Change From Previous Period?
AZ Physicians IPA *	1	114	113	99.1%		
	2	381	356	93.4%		
	3-6	1439	1257	87.4%		
	7-11	2801	2077	74.2%		
	12-18	2867	2108	73.5%		
	Total	7602	5911	77.8%	11.4%	Yes (p<.001)
AZ Physicians IPA	1	116	99	85.3%		
	2	407	350	86.0%		
	3-6	1355	1055	77.9%		
	7-11	2577	1745	67.7%		
	12-18	2819	1827	64.8%		
	Total	7274	5076	69.8%		
CIGNA Community Choice*	1	61	61	100.0%		
	2	123	122	99.2%		
	3-6	479	423	88.3%		
	7-11	924	709	76.7%		
	12-18	909	673	74.0%		
	Total	2496	1988	79.6%	4.8%	Yes (p=.002)
CIGNA Community Choice	1	22	20	90.9%		
	2	134	119	88.8%		
	3-6	449	366	81.5%		
	7-11	745	554	74.4%		
	12-18	848	611	72.1%		
	Total	2198	1670	76.0%		
Family Health Plan NEAZ *	1	1	1	100.0%		
	2	5	5	100.0%		
	3-6	18	16	88.9%		
	7-11	97	81	83.5%		
	12-18	114	87	76.3%		
	Total	235	190	80.9%	4.5%	No (p=.428)
Family Health Plan NEAZ	1	1	1	0.0%		
	2	1	1	100.0%		
	3-6	11	10	90.9%		
	7-11	43	30	69.8%		
	12-18	72	57	79.2%		
	Total	128	99	77.3%		

* Denotes Contractor met or exceeded the AHCCCS Minimum Performance Standard.
Shaded rows are totals and percentages for the previous measurement period.

Table 2
Arizona Health Care Cost Containment System
CHILDREN'S ACCESS TO PRIMARY CARE PRACTITIONERS, BY CONTRACTOR
MEMBERS ELIGIBLE UNDER KIDSCARE
Measurement Period: October 1, 2001, through September 30, 2002

Contractor	Ages	Number of Members	Number with ≥ 1 Visits	Percent with ≥ 1 Visits	Relative Percent Change from Previous Period	Statistically Significant Change From Previous Period?
Health Choice AZ *	1	35	34	97.1%		
	2	141	134	95.0%		
	3-6	408	351	86.0%		
	7-11	564	425	75.4%		
	12-18	459	347	75.6%		
	Total	1,607	1,291	80.3%	20.3%	Yes (p<.001)
Health Choice AZ	1	36	32	88.9%		
	2	131	113	86.3%		
	3-6	333	254	76.3%		
	7-11	595	361	60.7%		
	12-18	512	313	61.1%		
	Total	1,607	1073	66.8%		
Maricopa Health Plan	1	22	21	95.5%		
	2	84	72	85.7%		
	3-6	314	261	83.1%		
	7-11	458	282	61.6%		
	12-18	281	162	57.7%		
	Total	1159	798	68.9%	38.9%	Yes (p<.001)
Maricopa Health Plan	1	12	10	83.3%		
	2	82	61	74.4%		
	3-6	198	117	59.1%		
	7-11	370	167	45.1%		
	12-18	258	101	39.1%		
	Total	920	456	49.6%		
Mercy Care Plan *	1	76	72	94.7%		
	2	314	296	94.3%		
	3-6	1,120	972	86.8%		
	7-11	1,947	1,511	77.6%		
	12-18	1,891	1,416	74.9%		
	Total	5,348	4,267	79.8%	18.4%	Yes (p<.001)
Mercy Care Plan	1	63	55	87.3%		
	2	291	242	83.2%		
	3-6	975	714	73.2%		
	7-11	1,769	1,154	65.2%		
	12-18	1,953	1,239	63.4%		
	Total	5,051	3,404	67.4%		
Phoenix Health Plan/CC *	1	38	38	100.0%		
	2	153	145	94.8%		
	3-6	594	523	88.0%		
	7-11	910	669	73.5%		
	12-18	694	503	72.5%		
	Total	2,389	1,878	78.6%	19.2%	Yes (p<.001)
Phoenix Health Plan/CC	1	25	23	92.0%		
	2	112	93	83.0%		
	3-6	419	317	75.7%		
	7-11	668	407	60.9%		
	12-18	590	356	60.3%		
	Total	1,814	1,196	65.9%		

* Denotes Contractor met or exceeded the AHCCCS Minimum Performance Standard.

Table 2
Arizona Health Care Cost Containment System
CHILDREN'S ACCESS TO PRIMARY CARE PRACTITIONERS, BY CONTRACTOR
MEMBERS ELIGIBLE UNDER KIDSCARE
Measurement Period: October 1, 2001, through September 30, 2002

Contractor	Ages	Number of Members	Number with ≥ 1 Visits	Percent with ≥ 1 Visits	Relative Percent Change from Previous Period	Statistically Significant Change From Previous Period?
Pima Health System *	1	2	2	100.0%		
	2	14	14	100.0%		
	3-6	38	34	89.5%		
	7-11	105	85	81.0%		
	12-18	95	76	80.0%		
	Total	254	211	83.1%	13.6%	Yes (p=.009)
Pima Health System	1	6	5	0.0%		
	2	13	12	92.3%		
	3-6	28	25	0.0%		
	7-11	81	56	69.1%		
	12-18	84	57	67.9%		
	Total	212	155	73.1%		
University Family Care *	1	11	11	100.0%		
	2	43	42	97.7%		
	3-6	120	107	89.2%		
	7-11	280	230	82.1%		
	12-18	390	304	77.9%		
	Total	844	694	82.2%	13.7%	Yes (p<.001)
University Family Care	1	13	13	100.0%		
	2	24	22	0.0%		
	3-6	96	78	81.3%		
	7-11	293	215	73.4%		
	12-18	434	294	67.7%		
	Total	860	622	72.3%		
TOTAL	1	360	353	98.1%		
	2	1,258	1,186	94.3%		
	3-6	4,530	3,944	87.1%		
	7-11	8,086	6,069	75.1%		
	12-18	7,700	5,676	73.7%		
	Total	21,934	17,228	78.5%	14.6%	Yes (p<.001)
TOTAL	1	294	258	87.8%		
	2	1,195	1,013	84.8%		
	3-6	3,864	2,936	76.0%		
	7-11	7,141	4,689	65.7%		
	12-18	7,570	4,855	64.1%		
	Total	20,064	13,751	68.5%		

* Denotes Contractor met or exceeded the AHCCCS Minimum Performance Standard.

Well-Child Visits in the First 15 months of Life

The most dramatic growth during childhood – including physical, cognitive, social and emotional development – occurs during infancy. By one year of age, an infant triples his birth weight, adds almost 50 percent to his length, and achieves most of his brain growth.

During this time, health care providers help ensure that children are adequately protected against infectious diseases by vaccinating them at the appropriate intervals, and screening for physical illness or developmental delays, which can be minimized with early intervention. This also is an ideal time to counsel parents about infant care, nutrition, sleep position and injury prevention.

Indicator Description

This indicator measured the percentage of children who:

- turned 15 months of age during the measurement period (October 1, 2001, through September 30, 2002),
- were continuously enrolled with one acute-care Contractor from 31 days of age (one break in enrollment, not exceeding 31 days, was allowed), and
- had six or more well-child visits during the first 15 months of life.

Indicator Goals

AHCCCS has adopted a Minimum Performance Standard that Contractors achieve a rate of at least 58 percent for this indicator. If Contractors have already achieved this rate, they should strive for the AHCCCS Goal of 64 percent.

Trends and National Benchmarks

The National Committee for Quality Assurance (NCQA) has reported a national average for Medicaid health plans for this

indicator. In calendar year 2002, the Medicaid average for six or more well-child visits was 36.6 percent.

The AHCCCS overall rate for Medicaid-eligible children reached its highest point during the current measurement period, at 68 percent (Table 3). The current rate represents a relative increase of 11.4 percent and is statistically significant ($p < .001$).

This is the first year AHCCCS has measured this indicator for KidsCare members. Since most children in this age group qualify for AHCCCS under Medicaid, the sample of 15-month-olds eligible through KidsCare included only 24 members. The rate of well-child visits among this group was 71 percent; however, the sample size is too small to yield valid conclusions.

By county, the highest overall rate for children eligible through Medicaid was in Pima County.

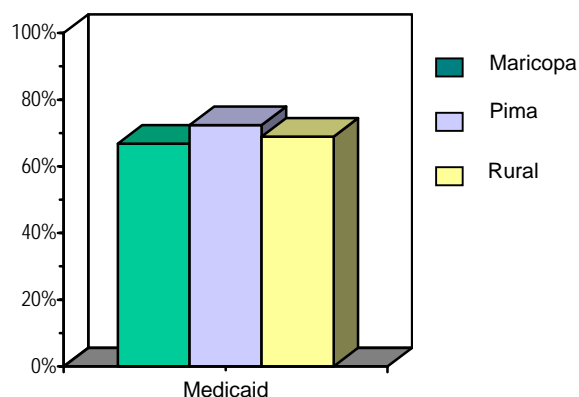


Table 3
Arizona Health Care Cost Containment System
WELL-CHILD VISITS IN THE FIRST 15 MONTHS OF LIFE, BY CONTRACTOR
MEMBERS ELIGIBLE UNDER MEDICAID
Measurement Period: October 1, 2001, through September 30, 2002

Contractor	Number of Members	Number with ≥ 6 Visits	Percent with ≥ 6 Visits	Relative Percent Change From Previous Period	Statistically Significant Change From Previous Period?
AZ Physicians IPA *	5,142	3,571	69.4%	5.9%	Yes (p<.001)
AZ Physicians IPA	3,800	2,491	65.6%		
CIGNA Community Choice *	1,281	837	65.3%	-1.5%	No (p=.634)
CIGNA Community Choice	779	517	66.4%		
Family Health Plan NEAZ *	112	69	61.6%	-11.8%	No (p=.305)
Family Health Plan NEAZ	53	37	69.8%		
Health Choice AZ *	1,869	1,241	66.4%	11.2%	Yes (p<.001)
Health Choice AZ	1,388	829	59.7%		
Maricopa Health Plan *	1,200	796	66.3%	34.5%	Yes (p<.001)
Maricopa Health Plan	817	403	49.3%		
Mercy Care Plan *	5,058	3,408	67.4%	17.6%	Yes (p<.001)
Mercy Care Plan	2,790	1,599	57.3%		
Phoenix Health Plan/CC *	1,691	1,150	68.0%	17.7%	Yes (p<.001)
Phoenix Health Plan/CC	1,502	868	57.8%		
Pima HealthSystem *	322	253	78.6%	0.2%	No (p=.961)
Pima Health System	199	156	78.4%		
University Family Care *	417	320	76.7%	8.4%	No (p=.076)
University Family Care	284	201	70.8%		
TOTAL	17,092	11,645	68.1%	11.4%	Yes (p<.001)
TOTAL	11,612	7,101	61.2%		

* Denotes Contractor met or exceeded the AHCCCS Minimum Performance Standard.

Shaded rows are previously reported totals and percentages.

Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life

Children who are healthy are better able to learn and develop. Well-child visits during the preschool and early school years are important in helping children reach their full potential and become productive, healthy adults. These visits allow any medical, behavioral or developmental problems to be detected and addressed.

Health care providers also can administer any needed vaccines and educate parents about adequate nutrition, oral health and injury prevention during well-child visits. Some evidence shows that provider counseling can increase the use of seat belts, child safety seats and bicycle helmets, especially when directed at the parents of young children.

Indicator Description

This indicator measured the percentage of children who:

- were 3, 4, 5, or 6 years old at the end of the measurement period (October 1, 2001, through September 30, 2002),
- were continuously enrolled with one acute-care Contractor during the measurement period (one break in enrollment, not exceeding 31 days, was allowed), and
- had at least one well-child visit during the measurement period.

Indicator Goals

AHCCCS has adopted a Minimum Performance Standard that Contractors achieve a rate of at least 48 percent for this indicator. If Contractors have already achieved this rate, they should strive for the AHCCCS Goal of 64 percent.

Trends and National Benchmarks

The National Committee for Quality Assurance (NCQA) has reported a national

average of 55.1 percent for Medicaid health plans for this indicator in calendar year 2002.

The AHCCCS overall rate for Medicaid-eligible children reached its highest point during the current measurement period, at 52 percent (Table 4). The current rate represents a relative increase of 9.4 percent and is statistically significant ($p < .001$).

This is the first year AHCCCS has measured this indicator for KidsCare members. The rate for this group was 57 percent (Table 5).

By county, overall rates for Medicaid-eligible children were similar. For KidsCare members, rates were slightly higher in Maricopa and Pima counties, compared with the combined rural counties.

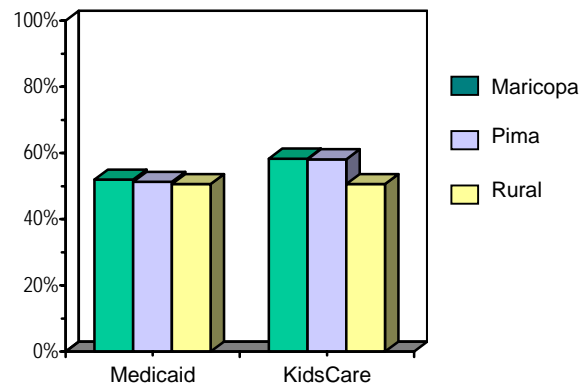


Table 4
Arizona Health Care Cost Containment System
WELL-CHILD VISITS IN THE THIRD, FOURTH, FIFTH AND SIXTH YEARS OF LIFE, BY CONTRACTOR
MEMBERS ELIGIBLE UNDER MEDICAID
Measurement Period: October 1, 2001, through September 30, 2002

Contractor	Number of Members	Number with ≥ 1 Visits	Percent with ≥ 1 Visits	Relative Percent Change From Previous Period	Statistically Significant Change From Previous Period?
AZ Physicians IPA *	16,391	8,559	52.2%	4.2%	Yes (p<.001)
AZ Physicians IPA	12,807	6,419	50.1%		
CIGNA Community Choice*	3,737	1,911	51.1%	-0.9%	No (p=.726)
CIGNA Community Choice	2,689	1,387	51.6%		
Family Health Plan NEAZ *	673	361	53.6%	-17.2%	Yes (p=.003)
Family Health Plan NEAZ	230	149	64.8%		
Health Choice AZ *	4,468	2,401	53.7%	9.9%	Yes (p<.001)
Health Choice AZ	3,588	1,755	48.9%		
Maricopa Health Plan *	3,014	1,499	49.7%	26.8%	Yes (p<.001)
Maricopa Health Plan	2,377	932	39.2%		
Mercy Care Plan *	12,350	6,156	49.8%	14.7%	Yes (p<.001)
Mercy Care Plan	9,250	4,020	43.5%		
Phoenix Health Plan/CC *	5,373	2,795	52.0%	17.9%	Yes (p<.001)
Phoenix Health Plan/CC	4,008	1,769	44.1%		
Pima Health System *	675	366	54.2%	-2.9%	No (p=.560)
Pima Health System	589	329	55.9%		
University Family Care *	1,267	649	51.2%	16.7%	Yes (p=.001)
University Family Care	998	438	43.9%		
TOTAL	47,948	24,697	51.5%	9.4%	Yes (p<.001)
TOTAL	36,536	17,198	47.1%		

* Denotes Contractor met or exceeded the AHCCCS Minimum Performance Standard.
Shaded rows are previously reported totals and percentages.

Table 5
Arizona Health Care Cost Containment System
WELL-CHILD VISITS IN THE THIRD, FOURTH, FIFTH AND SIXTH YEARS OF LIFE, BY CONTRACTOR
MEMBERS ELIGIBLE UNDER KIDSCARE
Measurement Period: October 1, 2001, through September 30, 2002

Contractor	Number of Members	Number with ≥1 Visits	Percent with ≥1 Visits
AZ Physicians IPA *	1,439	766	53.2%
CIGNA Community Choice *	479	274	57.2%
Family Health Plan NEAZ *	18	12	66.7%
Health Choice AZ *	408	266	65.2%
Maricopa Health Plan *	314	190	60.5%
Mercy Care Plan *	1,120	586	52.3%
Phoenix Health Plan/CC *	594	385	64.8%
Pima Health System *	38	24	63.2%
University Family Care *	120	71	59.2%
TOTAL	4,530	2,574	56.8%

Adolescent Well-care Visits

Adolescence generally is characterized by good health. However, data indicate that many teenagers are involved in unhealthy behaviors, including alcohol and other drug use, tobacco use, unprotected sex, driving without seat belts and speeding, poor diet and inadequate physical activity. Nationally and in Arizona, the major causes of death in adolescents are motor vehicle accidents, other unintentional injuries, homicide, and suicide.

Since most of the risk factors that contribute to adolescent morbidity and mortality are preventable, it is crucial to identify early signs of risk-taking or unhealthy behaviors. Regular well-care visits that address the psychological, behavioral and physical aspects of health are very important in helping adolescents become healthy adults.

Indicator Description

This indicator measured the percentage of members who:

- were ages 11 through 20 years if eligible under Medicaid, or 11 through 18 years if eligible under KidsCare, as of September 30, 2002,
- were continuously enrolled with one acute-care Contractor during a two-year measurement period (one break in enrollment, not exceeding 31 days, was allowed), and
- had at least one well-care visit during the two-year period (October 1, 2000, through September 30, 2002).

Results are reported by two age groups, 11 through 15 years and 16 years and older.

Indicator Goals

AHCCCS has adopted a Minimum Performance Standard that Contractors

achieve a rate of at least 48 percent for this indicator. If Contractors have already achieved this rate, they should strive for an AHCCCS-established Goal of 49 percent.

Trends and National Benchmarks

The National Committee for Quality Assurance (NCQA) has not reported a Medicaid rate for adolescent well-care visits in a two-year period.

The AHCCCS overall rate for Medicaid-eligible members reached its highest point during the current measurement period, at 50 percent. The current rate represents a relative increase of 2.9 percent and is statistically significant ($p=.001$).

This is the first year AHCCCS has measured this indicator for KidsCare members. The overall rate for this group was 55 percent.

Overall rates for both the Medicaid and KidsCare groups were highest in Pima County, compared with Maricopa and the combined rural counties.

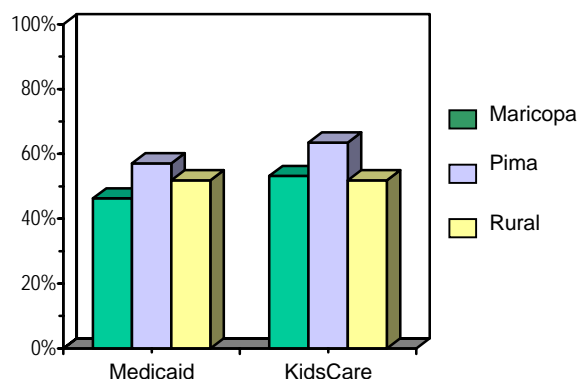


Table 6
Arizona Health Care Cost Containment System
ADOLESCENT WELL-CARE VISITS, BY CONTRACTOR
MEMBERS ELIGIBLE UNDER MEDICAID
Measurement Period: October 1, 2000, through September 30, 2002

Contractor	Ages	Visits within a Two-year Period			Relative Percent Change From Previous Period	Statistically Significant Change From Previous Period?
		Number of Members	Number with ≥1 Visits	Percent with ≥1 Visits		
AZ Physicians IPA *	11-15	10,326	5,481	53.1%		
	16-20	2,419	1,021	42.2%		
	Total	12,745	6,502	51.0%	0.14%	No (p=.918)
AZ Physicians IPA	11-15	6,727	3,655	54.3%		
	16-20	1,645	610	37.1%		
	Total	8,372	4,265	50.9%		
CIGNA Community Choice *	11-15	2,088	1,061	50.8%		
	16-20	499	234	46.9%		
	Total	2,587	1,295	50.1%	-6.3%	Yes (p=.037)
CIGNA Community Choice	11-15	1,182	661	55.9%		
	16-20	332	148	44.6%		
	Total	1,514	809	53.4%		
Family Health Plan NEAZ *	11-15	175	118	67.4%		
	16-20	50	20	40.0%		
	Total	225	138	61.3%	11.3%	No (p=.214)
Family Health Plan NEAZ	11-15	136	77	56.6%		
	16-20	31	15	48.4%		
	Total	167	92	55.1%		
Health Choice AZ *	11-15	2,039	1,078	52.9%		
	16-20	434	195	44.9%		
	Total	2,473	1,273	51.5%	5.8%	No (p=.081)
Health Choice AZ	11-15	1,222	630	51.6%		
	16-20	346	133	38.4%		
	Total	1,568	763	48.7%		
Maricopa Health Plan	11-15	1,673	664	39.7%		
	16-20	419	125	29.8%		
	Total	2,092	789	37.7%	26.8%	Yes (p<.001)
Maricopa Health Plan	11-15	1,082	345	31.9%		
	16-20	310	69	22.3%		
	Total	1,392	414	29.7%		
Mercy Care Plan *	11-15	6,670	3,498	52.4%		
	16-20	1,618	650	40.2%		
	Total	8,288	4,148	50.0%	6.3%	Yes (p=.001)
Mercy Care Plan	11-15	3,894	1,961	50.4%		
	16-20	1,068	375	35.1%		
	Total	4,962	2,336	47.1%		
Phoenix Health Plan/CC	11-15	2,931	1,442	49.2%		
	16-20	671	228	34.0%		
	Total	3,602	1,670	46.4%	2.1%	No (p=.463)
Phoenix Health Plan/CC	11-15	2,148	1,043	48.6%		
	16-20	544	180	33.1%		
	Total	2,692	1,223	45.4%		

* Denotes that Contractor met or exceeded the AHCCCS Minimum Performance Standard.
Shaded rows are previously reported totals and percentages.

Table 6
Arizona Health Care Cost Containment System
ADOLESCENT WELL-CARE VISITS, BY CONTRACTOR
MEMBERS ELIGIBLE UNDER MEDICAID
Measurement Period: October 1, 2000, through September 30, 2002

Contractor	Ages	Visits within a Two-year Period			Relative Percent Change From Previous Period	Statistically Significant Change From Previous Period?
		Number of Members	Number with ≥ 1 Visits	Percent with ≥ 1 Visits		
Pima Health System *	11-15	633	396	62.6%		
	16-20	143	69	48.3%		
	Total	776	465	59.9%	1.9%	No (p=.684)
Pima Health System	11-15	466	290	62.2%		
	16-20	90	37	41.1%		
	Total	556	327	58.8%		
University Family Care *	11-15	964	618	64.1%		
	16-20	202	93	46.0%		
	Total	1,166	711	61.0%	0.4%	No (p=.909)
University Family Care	11-15	582	375	64.4%		
	16-20	146	67	45.9%		
	Total	728	442	60.7%		
TOTAL	11-15	27,499	14,356	52.2%		
	16-20	6,455	2,635	40.8%		
	Total	33,954	16,991	50.0%	2.9%	Yes (p=.001)
TOTAL	11-15	17,439	9,037	51.8%		
	16-20	4,512	1,634	36.2%		
	Total	21,951	10,671	48.6%		

Table 7
Arizona Health Care Cost Containment System
ADOLESCENT WELL-CARE VISITS, BY CONTRACTOR
MEMBERS ELIGIBLE UNDER KIDSCARE
Measurement Period: October 1, 2000, through September 30, 2002

Contractor	Ages	Visits within a Two-year Period		
		Number of Members	Number with ≥ 1 Visits	Percent with ≥ 1 Visits
AZ Physicians IPA *	11-15	1,133	600	53.0%
	16-20	289	121	41.9%
	Total	1,422	721	50.7%
CIGNA Community Choice *	11-15	325	210	64.6%
	16-20	86	40	46.5%
	Total	411	250	60.8%
Family Health Plan NEAZ *	11-15	28	19	67.9%
	16-20	5	4	80.0%
	Total	33	23	69.7%
Health Choice AZ *	11-15	226	142	62.8%
	16-20	28	14	50.0%
	Total	254	156	61.4%
Maricopa Health Plan	11-15	111	42	37.8%
	16-20	18	7	38.9%
	Total	129	49	38.0%
Mercy Care Plan *	11-15	787	471	59.8%
	16-20	192	92	47.9%
	Total	979	563	57.5%
Phoenix Health Plan/CC *	11-15	248	138	55.6%
	16-20	60	25	41.7%
	Total	308	163	52.9%
Pima Health System *	11-15	28	19	67.9%
	16-20	7	7	100.0%
	Total	35	26	74.3%
University Family Care *	11-15	157	104	66.2%
	16-20	41	22	53.7%
	Total	198	126	63.6%
TOTAL	11-15	3,043	1,745	57.3%
	16-20	726	332	45.7%
	Total	3,769	2,077	55.1%

* Denotes that Contractor met or exceeded the AHCCCS Minimum Performance Standard.

Annual Dental Visits

Oral health is inseparable from overall health status. A child's ability to learn and function well can be affected by problems of the teeth and gums. But, while most oral diseases are preventable, tooth decay is one of the most common health problems among children today.

Brushing, flossing and other oral health practices can reduce the risk of developing diseases of the teeth and gums. Regular professional dental care also is important. Preventive services, such as the application of topical fluorides and dental sealants, are known to reduce the rate of tooth decay and other oral diseases in children. Routine dental visits serve to educate individuals about dental hygiene and preventive measures.

Indicator Description

This indicator measured the percentage of children who:

- were ages 3 through 20 years if eligible under Medicaid, or 3 through 18 years if eligible under KidsCare, at the end of the measurement period (October 1, 2001, through September 30, 2002),
- were continuously enrolled with one acute-care Contractor during the measurement period (one break in enrollment, not exceeding 31 days, was allowed), and
- had at least one dental visit during the measurement period.

Results were analyzed by the proportion of members who received either preventive dental services only, treatment only, or both preventive services and treatment.

Indicator Goals

AHCCCS has adopted a Minimum Performance Standard that Contractors achieve a rate of at least 45 percent for this indicator. If Contractors have already achieved this rate, they should strive for the AHCCCS Goal of 55 percent.

Trends and National Benchmarks

The National Committee for Quality Assurance (NCQA) has reported a national Medicaid rate of 37.4 percent for this indicator in calendar year 2002.

The AHCCCS overall rate for Medicaid-eligible children reached its highest point during the current measurement period, at 48 percent (Table 8). The current rate represents a relative increase of 9.3 percent and is statistically significant ($p < .001$).

This is the first year AHCCCS has measured this indicator for KidsCare members. The overall rate for this group was 57 percent (Table 9).

Overall rates for both the Medicaid and KidsCare groups were highest in Maricopa County, compared with Pima and the combined rural counties.

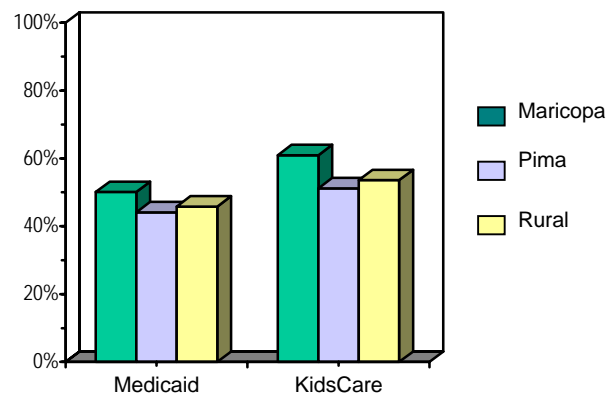


Table 8
Arizona Health Care Cost Containment System
ANNUAL DENTAL VISITS, BY CONTRACTOR
MEMBERS ELIGIBLE UNDER MEDICAID
Measurement Period: October 1, 2001, through September 30, 2002

Contractor	Number of Members	Number with Preventive Care Only	Percent with Preventive Care Only	Number with Treatment Only	Percent with Treatment Only	Number with both Preventive/Treatment	Percent with both Preventive/Treatment	Total Dental Services	Percent Dental Services	Relative Percent Change from Previous Period	Statistically Significant Change from Previous Period?
AZ Physicians IPA *	52,702	10,516	20.0%	998	1.9%	13,279	25.2%	24,793	47.0%	-0.4%	No (p=.573)
AZ Physicians IPA	37,170	7,448	20.0%	811	2.2%	9,298	25.0%	17,557	47.2%		
CIGNA Community Choice*	11,711	1,892	16.2%	123	1.1%	3,485	29.8%	5,500	47.0%	36.2%	Yes (p<.001)
CIGNA Community Choice	7,802	1,184	15.2%	152	1.9%	1,355	17.4%	2,691	34.5%		
Family Health Plan NEAZ	2,448	332	13.6%	54	2.2%	454	18.5%	840	34.3%	-10.2%	No (p=.055)
Family Health Plan NEAZ	720	95	13.2%	22	3.1%	158	21.9%	275	38.2%		
Health Choice AZ *	12,422	2,235	18.0%	191	1.5%	3,439	27.7%	5,865	47.2%	35.1%	Yes (p<.001)
Health Choice AZ	8,850	1,279	14.5%	199	2.2%	1,615	18.2%	3,093	34.9%		
Maricopa Health Plan	8,986	1,263	14.1%	85	0.9%	2,602	29.0%	3,950	44.0%	47.1%	Yes (p<.001)
Maricopa Health Plan	6,621	734	11.1%	184	2.8%	1,060	16.0%	1,978	29.9%		
Mercy Care Plan *	37,299	7,577	20.3%	571	1.5%	10,759	28.8%	18,907	50.7%	5.2%	Yes (p<.001)
Mercy Care Plan	25,064	4,556	18.2%	377	1.5%	7,145	28.5%	12,078	48.2%		
Phoenix Health Plan/CC *	15,554	2,933	18.9%	148	1.0%	4,701	30.2%	7,782	50.0%	11.6%	Yes (p<.001)
Phoenix Health Plan/CC	10,821	1,893	17.5%	141	1.3%	2,817	26.0%	4,851	44.8%		
Pima Health System *	2,664	473	17.8%	4	0.2%	752	28.2%	1,229	46.1%	11.3%	Yes (p=.001)
Pima Health System	2,154	354	16.4%	35	1.6%	504	23.4%	893	41.5%		
University Family Care *	4,507	886	19.7%	81	1.8%	1,078	23.9%	2,045	45.4%	5.1%	No (p=.055)
University Family Care	3,311	592	17.9%	66	2.0%	772	23.3%	1,430	43.2%		
TOTAL	148,293	28,107	19.0%	2,255	1.5%	40,549	27.3%	70,911	47.8%	9.3%	Yes (p<.001)
TOTAL	102,513	18,135	17.7%	1,987	1.9%	24,724	24.1%	44,846	43.7%		

* Denotes that Contractor met or exceeded the AHCCCS Minimum Performance Standard.
Shaded rows are previously reported totals and percentages.

Table 9
Arizona Health Care Cost Containment System
ANNUAL DENTAL VISITS, BY CONTRACTOR
MEMBERS ELIGIBLE UNDER KIDSCARE
Measurement Period: October 1, 2001, through September 30, 2002

Contractor	Number of Members	Number with Preventive Care Only	Percent with Preventive Care Only	Number with Treatment Only	Percent with Treatment Only	Number with both Preventive/Treatment	Percent with both Preventive/Treatment	Total Dental Services	Percent Dental Services
AZ Physicians IPA *	7,107	1,461	20.6%	150	2.1%	2,139	30.1%	3,750	52.8%
CIGNA Community Choice *	2,312	407	17.6%	26	1.1%	842	36.4%	1,275	55.1%
Family Health Plan NEAZ	229	41	17.9%	4	1.7%	54	23.6%	99	43.2%
Health Choice AZ *	1,431	295	20.6%	24	1.7%	495	34.6%	814	56.9%
Maricopa Health Plan *	1,053	188	17.9%	6	0.6%	463	44.0%	657	62.4%
Mercy Care Plan *	4,958	1,142	23.0%	75	1.5%	1,864	37.6%	3,081	62.1%
Phoenix Health Plan/CC *	2,198	494	22.5%	18	0.8%	892	40.6%	1,404	63.9%
Pima Health System *	238	64	26.9%	0	0.0%	86	36.1%	150	63.0%
University Family Care *	790	184	23.3%	15	1.9%	217	27.5%	416	52.7%
TOTAL	20,316	4,276	21.0%	318	1.6%	7,052	34.7%	11,646	57.3%

* Denotes that Contractor met or exceeded the AHCCCS Minimum Performance Standard.
Shaded rows are previously reported totals and percentages.

Adults' Access to Preventive/Ambulatory Health Services

Three behaviors – tobacco use, poor nutrition and lack of physical activity – are major contributors to this country's leading killers, cardiovascular disease and cancer. These behaviors often worsen the complications of chronic diseases, such as diabetes, and increase the risk of developing other serious illnesses.

Access to routine ambulatory medical services for adults is essential to the early diagnosis and treatment of diseases. Regular health care visits also provide opportunities for clinicians to educate and counsel patients on smoking cessation, diet, exercise and other healthy behaviors.

Indicator Description

This indicator measured the percentage of members who:

- were ages 21 through 64 years at the end of the measurement period (October 1, 2001, through September 30, 2002),
- were continuously enrolled with one acute-care Contractor during the measurement period (one break in enrollment, not exceeding 31 days, was allowed), and
- had at least one preventive/ambulatory visit during the measurement period. These visits included all face-to-face encounters with one of the following practitioners: primary care physicians, specialists, physician's assistants, nurse practitioners, ophthalmologists and optometrists.

Results were analyzed by two age groups, members 21 through 44 years and 45 through 64 years.

Indicator Goals

AHCCCS has adopted a Minimum Performance Standard that Contractors achieve a rate of at least 78 percent for this indicator. If Contractors have already achieved this rate, they should strive for an AHCCCS-established Goal of 80 percent.

Trends and National Benchmarks

The National Committee for Quality Assurance (NCQA) has reported national Medicaid averages for adults' access to preventive/ambulatory health services by age group. In calendar year 2002, the rates were:

20 to 44 years	73.1 percent
45 to 64 years	79.7 percent

Overall, AHCCCS rates were 75 percent for members 21 to 44 years and 82 percent for members 45 to 64 years. The AHCCCS total rate declined slightly during the current measurement period, to a rate of 77 percent (Table 10). The current rate represents a relative decrease of 1.3 percent, which is statistically significant ($p < .001$).

The overall rate for this indicator was slightly higher in Pima County, compared with Maricopa and the combined rural counties.

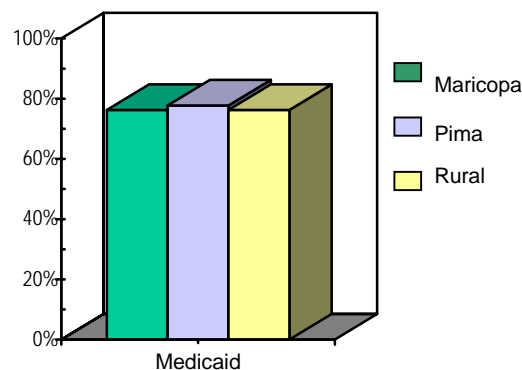


Table 10
Arizona Health Care Cost Containment System
ADULTS' ACCESS TO PREVENTIVE/AMBULATORY HEALTH SERVICES, BY CONTRACTOR
MEMBERS ELIGIBLE UNDER MEDICAID
Measurement Period: October 1, 2001, through September 30, 2002

Contractor	Ages	Number of Members	Number with ≥1 Visits	Percent with ≥1 Visits	Relative Percent Change From Previous Period	Statistically Significant Change From Previous Period?
AZ Physicians IPA	21-44	21,979	16,332	74.3%	-4.4%	Yes (p<.001)
	45-64	7,145	5,940	83.1%		
	Total	29,124	22,272	76.5%		
AZ Physicians IPA	21-44	11,144	8,655	77.7%		
	45-64	4,541	3,890	85.7%		
	Total	15,685	12,545	80.0%		
CIGNA Community Choice *	21-44	4,656	3,716	79.8%	-2.3%	Yes (p=.024)
	45-64	1,374	1,146	83.4%		
	Total	6,030	4,862	80.6%		
CIGNA Community Choice	21-44	2,349	1,926	82.0%		
	45-64	906	761	84.0%		
	Total	3,255	2,687	82.5%		
Family Health Plan NEAZ	21-44	1,283	875	68.2%	0.4%	No (p=.903)
	45-64	529	394	74.5%		
	Total	1,812	1,269	70.0%		
Family Health Plan NEAZ	21-44	259	179	69.1%		
	45-64	144	102	70.8%		
	Total	403	281	69.7%		
Health Choice AZ	21-44	4,918	3,544	72.1%	0.7%	No (p=.555)
	45-64	1,660	1,297	78.1%		
	Total	6,578	4,841	73.6%		
Health Choice AZ	21-44	2,724	1,919	70.4%		
	45-64	1,253	987	78.8%		
	Total	3,977	2,906	73.1%		
Maricopa Health Plan	21-44	2,470	1,643	66.5%	3.3%	Yes (p=.049)
	45-64	1,436	1,118	77.9%		
	Total	3,906	2,761	70.7%		
Maricopa Health Plan	21-44	1,567	965	61.6%		
	45-64	1,173	910	77.6%		
	Total	2,740	1,875	68.4%		
Mercy Care Plan *	21-44	16,416	12,518	76.3%	1.1%	No (p=.081)
	45-64	5,311	4,450	83.8%		
	Total	21,727	16,968	78.1%		
Mercy Care Plan	21-44	8,017	6,001	74.9%		
	45-64	3,434	2,846	82.9%		
	Total	11,451	8,847	77.3%		

* Denotes Contractor met or exceeded the AHCCCS Minimum Performance Standard.

Shaded rows are totals and percentages for the previous measurement period.

Table 10
Arizona Health Care Cost Containment System
ADULTS' ACCESS TO PREVENTIVE/AMBULATORY HEALTH SERVICES, BY CONTRACTOR
MEMBERS ELIGIBLE UNDER MEDICAID
Measurement Period: October 1, 2001, through September 30, 2002

Contractor	Ages	Number of Members	Number with ≥ 1 Visits	Percent with ≥ 1 Visits	Relative Percent Change From Previous Period	Statistically Significant Change From Previous Period?
Phoenix Health Plan/CC	21-44	5,451	4,040	74.1%	1.1%	No (p=.299)
	45-64	1,902	1,557	81.9%		
	Total	7,353	5,597	76.1%		
Phoenix Health Plan/CC	21-44	2,834	2,051	72.4%		
	45-64	1,394	1,131	81.1%		
	Total	4,228	3,182	75.3%		
Pima Health System	21-44	1,221	875	71.7%	-4.8%	Yes (p=.024)
	45-64	558	454	81.4%		
	Total	1,779	1,329	74.7%		
Pima Health System	21-44	663	493	74.4%		
	45-64	408	347	85.0%		
	Total	1,071	840	78.4%		
University Family Care *	21-44	1,918	1,488	77.6%	-2.7%	No (p=.079)
	45-64	786	647	82.3%		
	Total	2,704	2,135	79.0%		
University Family Care	21-44	1,058	847	80.1%		
	45-64	557	464	83.3%		
	Total	1,615	1,311	81.2%		
TOTAL	21-44	60,312	45,031	74.7%	-1.3%	Yes (p<.001)
	45-64	20,701	17,003	82.1%		
	Total	81,013	62,034	76.6%		
TOTAL	21-44	30,615	23,036	75.2%		
	45-64	13,810	11,438	82.8%		
	Total	44,425	34,474	77.6%		

Shaded rows are previousl reported totals and percentages.

Comprehensive Medical and Dental Program

In addition to acute-care Contractors, AHCCCS measured several performance indicators for the Comprehensive Medical and Dental Program (CMDP), a health plan for children and adolescents in foster care, which is operated by the Arizona Department of Economic Security (DES). Because of the uniqueness of that plan, results for CMDP cannot be compared directly with those of acute-care Contractors, and are reported separately.

Because children and teenagers are only enrolled in CMDP while they are in foster care, they often are enrolled in the plan for short periods of time and do not meet the continuous enrollment requirement used by AHCCCS. Thus, relatively few CMDP members qualify for inclusion in some of the AHCCCS performance indicators.

Because CMDP is operated specifically for children and adolescents who are taken into state custody, these members have unique situations and often more complex needs. Behavioral and other issues may present barriers to receiving routine preventive health care. Members in foster care also move frequently to different homes or facilities, and often are placed initially in a temporary home. CMDP has begun a pilot project to help ensure that an initial medical examination for new members is conducted within two weeks of entering state custody. It is expected that, through this project, children and adolescents in foster care will receive preventive as well as acute services more quickly, and that various health and social service needs are coordinated at that time.

Indicator Descriptions and Goals

AHCCCS measured five indicators of preventive health services among members

continuously enrolled in CMDP: Children's Access to PCPs; Well-child Visits in the First 15 Months of Life; Well-child Visits in the Third, fourth, fifth and Sixth Years of Life; Annual Dental Visits, and Adolescent Well-care Visits. The same methodology used to measure services for acute-care Contractors was utilized. However, because nearly all CMDP members are eligible for AHCCCS under Medicaid, the results do not include KidsCare members.

The same Minimum Performance Standards and Goals that apply to acute-care Contractors also apply to CMDP.

Results

Children's Access to PCPs – CMDP's rate for this indicator was 84 percent (Table 11), which was unchanged from the previous year ($p=.988$). The highest overall rate was in Pima County, at 87 percent.

Well-child Visits in the First 15 Months of Life – CMDP's rate for this indicator was 58 percent. However, only 11 members were selected for inclusion in this indicator and thus the sample size is too small to yield valid conclusions.

Well-child Visits in the Third, Fourth, Fifth and Sixth Years of Life – CMDP's rate for this indicator was 61 percent (Table 12), an increase over the previous rate of 56 percent. However, the results are not statistically significant ($p=.099$). Pima County showed the highest rate, at 67 percent.

Adolescent Well-care Visits – CMDP's rate for this indicator was 81 percent, a relative decrease of 1.8 percent (Table 13). The decrease is not statistically significant ($p=.386$). The highest rate was in Pima County, at 83 percent.

Annual Dental Visits – CMDP's rate for this indicator was 69 percent (Table 14). This rate cannot be compared with the rate for the previous year, which was affected by an encounter problem related to CMDP's use of a new computer system. However, the current rate is consistent with results for the previous six years, which were 60 percent or greater. Rates for Maricopa and Pima counties were 69 percent, and the rate for the combined rural counties was 68 percent.

Summary

CMDP's rates for Children's Access to PCPs by members 1 year old and 2 through 6 years exceeded the NCQA national averages for Medicaid health plans. CMDP's rate for Well-child visits in the Third, Fourth, Fifth and Sixth Years of Life also exceeded the NCQA Medicaid average.

In addition, CMDP's rates for all indicators met or exceeded AHCCCS Minimum Performance Standards.

Table 11
Arizona Health Care Cost Containment System
CHILDREN'S ACCESS TO PRIMARY CARE PRACTITIONERS
COMPREHENSIVE MEDICAL AND DENTAL PROGRAM
Measurement Period: October 1, 2001, through September 30, 2002

Ages	Number of Members	Number with ≥ 1 Visits	Percent with ≥ 1 Visits	Relative Percent Change from Previous Period	Statistically Significant Change from Previous Period?
1	205	198	96.6%		
2	177	161	91.0%		
3-6	539	476	88.3%		
7-11	625	489	78.2%		
12-21	1,506	1,230	81.7%		
Total	3,052	2,554	83.7%	0.0%	No (p=.988)
1	132	126	95.5%		
2	143	132	92.3%		
3-6	521	451	86.6%		
7-11	747	592	79.3%		
12-21	1,439	1,194	83.0%		
Total	2,982	2,495	83.7%		

Shaded rows are previously reported totals and percentages.

Table 12
Arizona Health Care Cost Containment System
WELL-CHILD VISITS IN THE THIRD, FOURTH, FIFTH AND SIXTH YEARS OF LIFE
COMPREHENSIVE MEDICAL AND DENTAL PROGRAM
Measurement Period October 1, 2001, through September 30, 2002

Number of Members	Number with ≥1 Visits	Percent with ≥1 Visits	Relative Percent Change from Previous Period	Statistically Significant Change from Previous Period?
539	331	61.4%	8.8%	No (p=.099)
521	294	56.4%		

Shaded row is the previously reported totals and percentage.

Table 13
Arizona Health Care Cost Containment System
ADOLESCENT WELL-CARE VISITS
COMPREHENSIVE MEDICAL AND DENTAL PROGRAM
Measurement Period October 1, 2000, through September 30, 2002

Ages	Visits within a Two-year Period			Relative Percent Change from Previous Period	Statistically Significant Change From Previous Period?
	Number of Members	Number with ≥ 1 Visits	Percent with ≥ 1 Visits		
11-15	848	701	82.7%		
16-20	215	159	74.0%		
Total	1063	860	80.9%	-1.8%	p = .386 N
11-15	720	606	84.2%		
16-20	179	135	75.4%		
Total	899	741	82.4%		

Shaded rows are previously reported totals and percentages.

Table 14
Arizona Health Care Cost Containment System
ANNUAL DENTAL VISITS
COMPREHENSIVE MEDICAL AND DENTAL PROGRAM
Measurement Period: October 1, 2001, through September 30, 2002

Number of Members	Number with Preventive Care Only	Percent with Preventive Care Only	Number with Treatment Only	Percent with Treatment Only	Number with both Preventive/Treatment	Percent with both Preventive/Treatment	Total Dental Services	Percent Dental Services
2,670	839	31.4%	75	2.8%	926	34.7%	1,840	68.9%

Trends in Selected AHCCCS Performance Indicators

The following graphs illustrate trends in AHCCCS performance indicators that have been measured for four years or more.

Figure 1: Children's Access to Primary Care Practitioners, Acute-care Contractors, Members Eligible under Medicaid

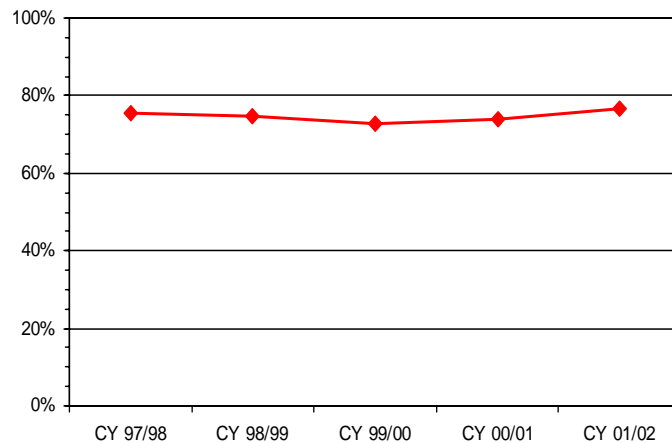
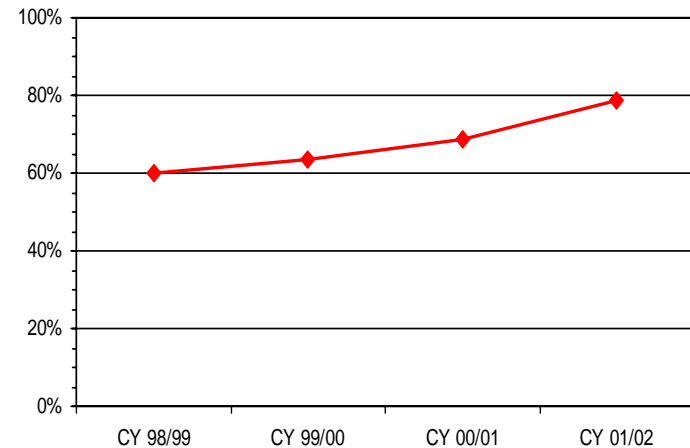


Figure 2: Children's Access to Primary Care Practitioners, Acute-care Contractors, Members Eligible under KidsCare



Trends in Selected AHCCCS Performance Indicators, cont.

Figure 3: Children's Access to Primary Care Practitioners, Comprehensive Medical and Dental Program

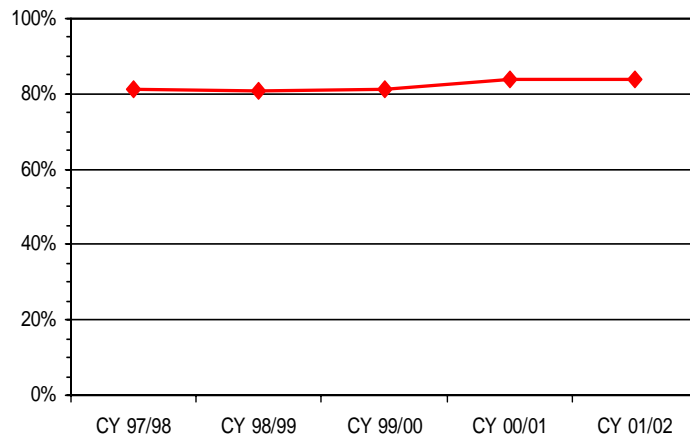
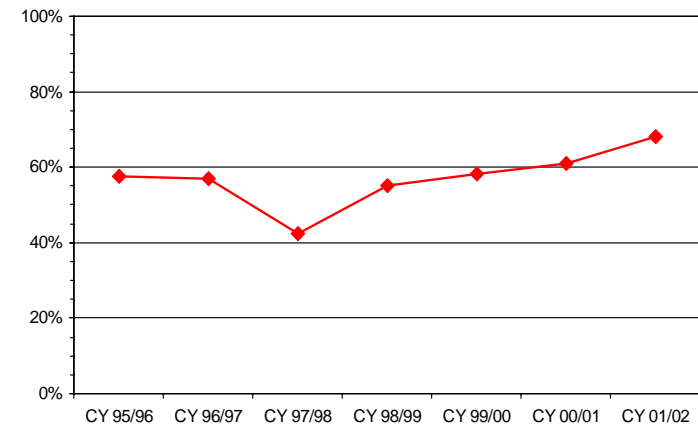


Figure 4: Well-child Visits in the First 15 Months of Life, Acute-care Contractors, Members Eligible under Medicaid



Trends in Selected AHCCCS Performance Indicators, cont.

Figure 5: Well-child Visits in the Third, Fourth, Fifth and Sixth Years of Life, Acute-care Contractors, Members Eligible under Medicaid

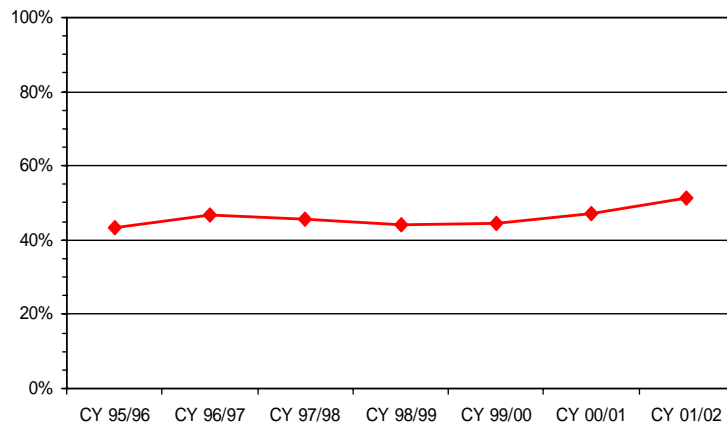
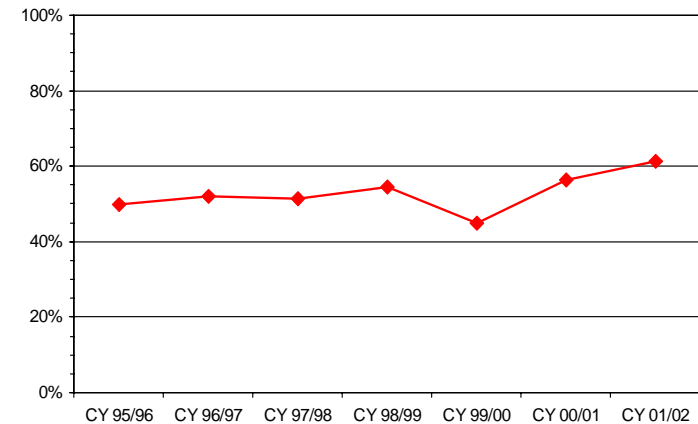


Figure 6: Well-child Visits in the Third, Fourth, Fifth and Sixth Years of Life, Comprehensive Medical and Dental Program



Trends in Selected AHCCCS Performance Indicators, cont.

Figure 7: Adolescent Well-care Visits, Acute-care Contractors, Members Eligible under Medicaid

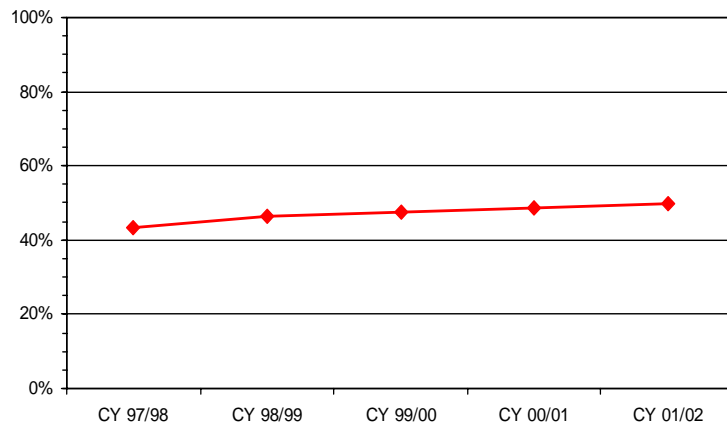
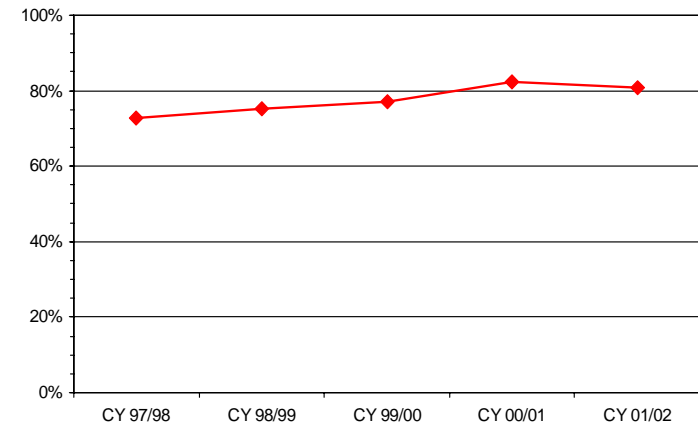


Figure 8: Adolescent Well-care Visits, Comprehensive Medical and Dental Program



Trends in Selected AHCCCS Performance Indicators, cont.

Figure 9: Annual Dental Visits, Acute-care Contractors, Members Eligible under Medicaid

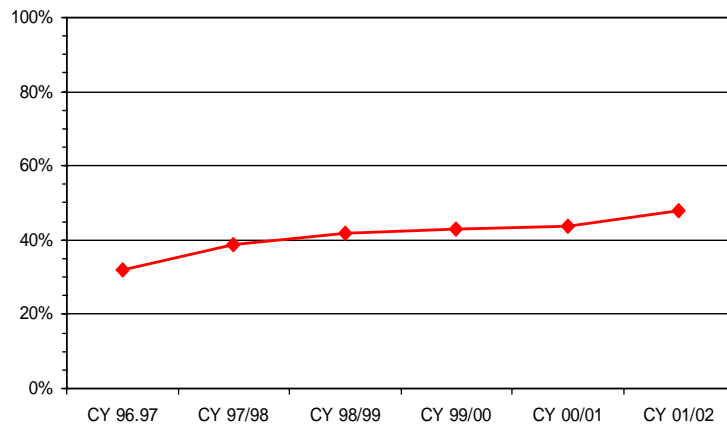


Figure 10: Adults' Access to Preventive/Ambulatory Health Services, Members Eligible under Medicaid

